## CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD REGION 9, SAN DIEGO REGION

## ATTACHMENT G - MONITORING AND REPORTING FORM

ORDER NO. R9-2005-0091 NPDES PERMIT NO. CA0107336

Please check and label the applicable reporting period:	
	Monthly
	Quarterly
	Semi-annual
	Annual

Constituent	Sample Type	Minimum Sampling Frequency	Sample Date	Results E-INF	Results W-INF	Units
	Grab	Weekly				MPN/100 mL
	Grab	Weekly				MPN/100 mL
Total Coliform	Grab	Weekly				MPN/100 mL
	Grab	Weekly				MPN/100 mL
	Grab	Weekly				MPN/100 mL
	Grab	Weekly				MPN/100 mL
	Grab	Weekly				MPN/100 mL
Fecal Coliform	Grab	Weekly				MPN/100 mL
	Grab	Weekly				MPN/100 mL
	Grab	Weekly				MPN/100 mL
	Grab	Weekly				MPN/100 mL
	Grab	Weekly				MPN/100 mL
Enterococcus	Grab	Weekly				MPN/100 mL
	Grab	Weekly				MPN/100 mL
	Grab	Weekly				MPN/100 mL
Suspended Solids	24 hr Composite	Quarterly				mg/L

**Effluent Monitoring Outfall No. 001 (East)** 

	Units		Minimum	Comple				Effluent Limita	ations				
Constituent		Sample Type	Sampling Frequency	Sample Date	Results	6-Month Median	Monthly	Maximum Daily	Instantaneous Minimum	Instantaneous Maximum			
D1.	MCD	Continue on		NT/A	1	Median	Average			Maximum			
Flow	MGD	Continuous	Daily	N/A				3.24					
Temperature	°C	Grab	Monthly										
pH (Units)	Units	Grab	Weekly						7.0	9.0			
	Units	Grab	Weekly						7.0	9.0			
	Units	Grab	Weekly						7.0	9.0			
	Units	Grab	Weekly						7.0	9.0			
	Units	Grab	Weekly						7.0	9.0			
	MPN/100 mL	Grab	Weekly			The medien	. 4.4.1 1:f		1	fan ana 20			
Total	MPN/100 mL	Grab	Weekly			The median total coliform concentration throughout the water column for any 30-day period shall not exceed 70/100 mL nor shall more than 10 percent of the							
Coliform	MPN/100 mL	Grab	Weekly										
Comoni	MPN/100 mL	Grab	Weekly			samples collected during any 30-day period exceed 230/100 mL for a five-tube decimal dilution test or 330/100 mL when a three tube dilution test is used.							
	MPN/100 mL	Grab	Weekly										
	MPN/100 mL	Grab	Weekly			The fecal coliform concentration based on a minimum of not les than five samples for any 30-day period, shall not exceed a log mean of 200/100 mL, nor shall more than 10 percent of total samples during any 30-day period exceed 400/100 mL.							
F 1	MPN/100 mL	Grab	Weekly										
Fecal Coliform -	MPN/100 mL	Grab	Weekly										
	MPN/100 mL	Grab	Weekly										
	MPN/100 mL	Grab	Weekly										
	CFU/100 mL	Grab	Weekly				35			104			
	CFU/100 mL	Grab	Weekly				35			104			
Entercoccus	CFU/100 mL	Grab	Weekly				35			104			
	CFU/100 mL	Grab	Weekly				35			104			
	CFU/100 mL	Grab	Weekly				35			104			
Residual	mg/L	Grab	Wastila				0.21			0.42			
Chlorine	lbs/day	Calculate	Weekly				5.7			11.3			
Residual	mg/L	Grab	XX1.1				0.21			0.42			
Chlorine	lbs/day	Calculate	Weekly			5.7 11.3 0.21 0.42							
Residual	mg/L	Grab	XX1.1										
Chlorine	lbs/day	Calculate	Weekly				5.7			11.3			
Residual	mg/L	Grab	Wa-1-1				0.21			0.42			
Chlorine	lbs/day	Calculate	Weekly			- 5.7 11.3							
Residual	mg/L	Grab	Weekly				0.21			0.42			
Chlorine	lbs/day	Calculate	weekiy				5.7			11.3			

Suspended Solids	mg/L	24-hr. Composite	Quarterly	The discharge of aquaria wastewater through Outfall No. 001 shall contain no increase in excess of 10 mg/L for a monthly average or 15 mg/L for a daily maximum when compared to the intake water.					
Settleable Solids	ml/L	Grab	Quarterly		1.0			3.0	
Oil and	mg/L	Grab	Semi-annual		25			75	
Grease	lbs/day	Calculate	Sellii-alilluai		676			2,026	
Turbidity	NTU	24-hr. Composite	Semi-annual		75			225	
Copper <sup>2</sup>	μg/L	24-hr. Composite	Semi-annual	24	38.13	76.5			
Соррсі	lbs/day	Calculated	Schii-amuai	0.65	1.0	2.1			
Silver <sup>2</sup>	μg/L	24-hr. Composite	Semi-annual	6.5	23.16	36			
Silvei	lbs/day	Calculated	Sellii-alilluai	0.2	0.6	1.0			
Ammonia	mg/L	24-hr. Composite	Semi-annual					0.55	
Allillollia	lbs/day	Calculated	Sellii-alilluai					15	
Acute Toxicity	TUa	24-hr. Composite	Annual		1.5			2.5	
Chronic Toxicity	TUc	24-hr. Composite	Once every 5-years			22			

<sup>1</sup> Daily flow values shall be submitted as an attachment to this form.

<sup>2</sup> Metals shall be reported as total recoverable.

**Effluent Monitoring Outfall No. 002 (West)** 

	Units		Minimum Sampling Frequency	Sample Date				Effluent Limit	ations			
Constituent		Sample Type			Results	6-Month Median	Monthly Average	Maximum Daily	Instantaneous Minimum	Instantaneous Maximum		
Flow	MGD	Continuous	Daily	N/A	1			6.12				
Temperature	°C	Grab	Monthly									
pH (Units)	Units	Grab	Weekly						7.0	9.0		
	Units	Grab	Weekly						7.0	9.0		
	Units	Grab	Weekly						7.0	9.0		
	Units	Grab	Weekly						7.0	9.0		
	Units	Grab	Weekly						7.0	9.0		
	MPN/100 mL	Grab	Weekly									
T . 1	MPN/100 mL	Grab	Weekly						ighout the water co			
Total	MPN/100 mL	Grab	Weekly						shall more than 10			
Coliform	MPN/100 mL	Grab	Weekly			<ul> <li>samples collected during any 30-day period exceed 230/100 mL for a five-tube decimal dilution test or 330/100 mL when a three tube dilution test is used.</li> </ul>						
	MPN/100 mL	Grab	Weekly			decimai	dilution test of a	550/100 HIL WHEH	a unce tube unutio	ii test is used.		
	MPN/100 mL	Grab	Weekly									
Б. 1	MPN/100 mL	Grab	Weekly			The fecal coliform concentration based on a minimum of not les than five samples						
Fecal Coliform -	MPN/100 mL	Grab	Weekly			for any 30-day period, shall not exceed a log mean of 200/100 mL, nor shall more than 10 percent of total samples during any 30-day period exceed 400/100 mL.						
	MPN/100 mL	Grab	Weekly									
	MPN/100 mL	Grab	Weekly									
	CFU/100 mL	Grab	Weekly				35			104		
	CFU/100 mL	Grab	Weekly				35			104		
Entercoccus	CFU/100 mL	Grab	Weekly				35			104		
	CFU/100 mL	Grab	Weekly				35			104		
	CFU/100 mL	Grab	Weekly				35			104		
Residual	mg/L	Grab	Weekly				0.21			0.42		
Chlorine	lbs/day	Calculate	WCCKIY				10.7			21.4		
Residual	mg/L	Grab	Weekly				0.21			0.42		
Chlorine	lbs/day	Calculate	WCCKIY			10.7 21.4						
Residual	mg/L	Grab	Weekly				0.21			0.42		
Chlorine	lbs/day	Calculate	WCKIY				10.7			21.4		
Residual	mg/L	Grab	Weekly				0.21			0.42		
Chlorine	lbs/day	Calculate	,, com				10.7			21.4		
Residual	mg/L	Grab	Weekly				0.21			0.42		
Chlorine	lbs/day	Calculate	,, comy				10.7			21.4		

Suspended Solids	mg/L	24-hr. Composite	Quarterly	The discharge of aquaria wastewater through Outfall No. 001 shall contain no increase in excess of 10 mg/L for a monthly average or 15 mg/L for a daily maximum when compared to the intake water.					
Settleable Solids	ml/L	Grab	Quarterly			1.0			3.0
Oil and	mg/L	Grab	Semi-annual			25			75
Grease	lbs/day	Calculate	Sellii-alilluai			1,276			3,828
Turbidity	NTU	24-hr. Composite	Semi-annual			75			225
Copper <sup>2</sup>	μg/L	24-hr. Composite	Semi-annual		24	38.13	76.5		
Copper	lbs/day	Calculated	Sellii-alilluai		1.2	1.9	3.9		
Silver <sup>2</sup>	μg/L	24-hr. Composite	Semi-annual		6.5	23.16	36		
Silvei	lbs/day	Calculated	Sellii-aliiluai		0.33	1.2	1.8		
Ammonia	mg/L	24-hr. Composite	Semi-annual						0.55
Allinoma	lbs/day	Calculated	Sellii-alilluai						28.1
Acute Toxicity	TUa	24-hr. Composite	Annual			1.5			2.5
Chronic Toxicity	TUc	24-hr. Composite	Once every 5-years				22		

Daily flow values shall be submitted as an attachment to this form.
 Metals shall be reported as total recoverable.

Additional data needed to determine compliance with the effluent limitations established in Order No. R9-2005-0091 shall be submitted as	an
attachment to this Monitoring and Reporting Form.	

## **Certification Statement:**

Pursuant to Section E.5. of Attachment D, this report must be signed and certified by the Discharger or a duly authorized representative of that person as follows:

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signed under Penalty of Perjury	Date	
Print Name		